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** CONTINUING DATA ***** CC

NONE

** FOREIGN APPLICATIONS ***** CC

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials <i>CC</i>	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 11	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 4
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TITLE

PLANT CELL DEATH SYSTEM

FILING FEE RECEIVED 2476	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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